

Original to [redacted]

7/10/63

July 8, 1963

[redacted]

file

[redacted]

7/31/63

[redacted]
Government Employees Health Association
P.O. Box 463
Washington 4, D. C.

Re: Psychiatric Treatment

Dear Mr. [redacted]

This will confirm that Mr. Randall has agreed to remove the 50 visit limit per calendar year on doctor visits for nervous and mental disorders.

Therefore, Page 45 of the policy, Part 2, of the paragraph headed Nervous or Mental Disorders will read as follows, "For all other covered charges incurred as a result of a nervous or mental disorder or combination thereof, the Association, providing such charges are incurred while the protected person or dependent is insured, will pay 50% of the covered charges in excess of the Deductible Amount; provided, however, that the maximum payable for professional psychiatric treatment by a physician at home, the office or the hospital shall not exceed \$15.00 a visit." The rest of that paragraph relative to the 100 visits can now be deleted.

On Page 15 of the brochure, the paragraph which treats the mental and nervous disorder coverage will read as follows, "For treatment of mental and nervous disorders, except when provided by a hospital - to 50% of covered expenses with services of a psychiatrist limited to a maximum payable by the Plan of \$15.00 per visit."

If you have any questions relative to this matter, [redacted] I should be pleased to hear from you.

Sincerely,

T. W. Premo, Manager
Claims Department

TWP/cd